



Buker Community Center
Augusta Recreation
207-626-2350

Create-A-Program
Course Proposal Form

Program Name/Theme: _____

Program Ages: _____ Program Gender: M F Both

Proposed Instructor: _____ Phone #: _____

Will Supplemental Staff Be Needed? Y N How Many? _____

Program Description and Learning Objectives: _____

What equipment will be needed (Recreation Bureau supplied)? _____

What equipment will be needed (participant or instructor supplied)? _____

Proposed Day and Time for Program: _____

Proposed Location for Program: _____

Proposed Cost for Program: _____ Instructor Fee: _____

Potential Enrollment? _____ Is there A Maximum Enrollment? _____